

ENTRY BLANK

PLEASE TYPE OR PRINT

Entered previous May Show

yes no

Ms.

Mr. Artist KAREN HALIMA FROMSON
(Last Name Last)

Permanent
Address

3200 WHITETHORN RD

Street

City

CLEVE. HTS. OHIO

44118

Tel. ()

932-9128

Zip

Area Code

Temporary or
Studio Address

Street

City

Tel. ()

Zip

Area Code

If you do not presently live in one of the counties of the Western Reserve, which county were you born in? _____

Collaborator

(If Any)

If May Show entries are not accepted or not sold:

Artist will pick up at Museum.
 Museum should dispose of.
 Museum should ship to artist C.O.D. at this address:

Special Instructions

When necessary include below instructions or a drawing of how the object is to be assembled and displayed.

This entry blank must be fully made out and signed. Unsigned entry blanks will not be accepted.

Note carefully calendar for delivery and return of objects. It is understood that the Museum will have the right to dispose for its own account any objects not called for by the dates listed.

It is also understood that accepted objects will remain on exhibition until August 21, 1977.

The submission of objects will be construed as acceptance of all conditions printed in the entry information.

Signature Karen Halima Fromson

3-3-49

ENTRY BLANKS

1

1. Paintings 2. Graphics 3. Photography
 4. Sculpture 5. Electric 6. Crafts

Materials

Untitled

Title

Price or NFS \$60	Insurance Value if NFS Only \$60	Size 16X20 framed
3-30	GRAPHICS AND PHOTOGRAPHY ONLY	

Additional No. For Sale 3	Total No. in Edition 3	Price Unframed \$50	Price of Frame 10 .55
ACCEPTED	DO NOT WRITE IN THIS SECTION	ACCEPTED	REJECTED

REJECTED 4	DO NOT WRITE IN THIS SECTION	ACCEPTED
ACCEPTED	DO NOT WRITE IN THIS SECTION	REJECTED

2

1. Paintings 2. Graphics 3. Photography
 4. Sculpture 5. Electric 6. Crafts

3-3-50

Materials

*Paint from for
Untitled*

Title

Price or NFS \$60	Insurance Value If NFS Only \$60	Size 16X20
GRAPHICS AND PHOTOGRAPHY ONLY		

Additional No. For Sale 3	Total No. in Edition 3	Price Unframed \$50	Price of Frame 10
ACCEPTED	DO NOT WRITE IN THIS SECTION	ACCEPTED	RECEIVED

REJECTED	DO NOT WRITE IN THIS SECTION	REJECTED	DATE
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